

ATTACHMENT XVI:

Sample Letter for Partner Services (PS) Memorandum of Agreement with Health Department

[INSERT DATE]

Shelia Edwards, Grants Management Specialist
Procurement and Grants Office
Centers for Disease Control and Prevention
2920 Brandywine Road, Mail Stop E15
Atlanta, GA 30341

Dear Ms. Edwards:

This letter confirms that [INSERT NAME OF HEALTH DEPARTMENT] staff have reviewed and discussed [INSERT CBO NAME]'s plans for referring clients to Partner Services (PS). This community-based organization (CBO) will be applying for funding under CDC Funding Opportunity Announcement ____.

[INSERT NAME OF HEALTH DEPARTMENT] can verify that this organization will comply with all state and local laws and regulations pertaining to PS. This letter also serves as a Memorandum of Agreement between [INSERT CBO NAME]'s and [INSERT NAME OF HEALTH DEPARTMENT] for PS. We have discussed all issues below with [INSERT THE CBO NAME]: [Select all that apply]

<input type="checkbox"/> Anonymous versus confidential testing	<input type="checkbox"/> Data collection and reporting
<input type="checkbox"/> Training of staff on the importance of PS	<input type="checkbox"/> Quality assurance of counselors
<input type="checkbox"/> Confidentiality	<input type="checkbox"/> Local laws and regulations
<input type="checkbox"/> Surveillance reporting	<input type="checkbox"/> Referral networks
<input type="checkbox"/> Ways to address barriers related to PS	<input type="checkbox"/> Target population to be served
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____

If you have any questions, please feel free to contact me at [INSERT CONTACT INFORMATION].

Sincerely,

[TYPE YOUR NAME HERE]
[TITLE]
[ADDRESS]